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Rec'd PCT/PTO 04 APR 2005 10/510192

Attorney Docket Number

HO-P03067US0

PTO/SB/08A (10-01)
Approved for use through 10/31/2002.0MB 0651-0031
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ond to a collection of information unless it contains a valid OMB control number Complete if Known Substitute for form 1449A/PTO Application Number 10/510.192 INFORMATION DISCLOSURE Filing Date September 30, 2004 STATEMENT BY APPLICANT First Named Inventor Janel Fone Art Unit N/A (use as many sheets as necessary) Examiner Name Not Yet Assigned

	U.S. PATENT DOCUMENTS									
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (If known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear					
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